## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Olavi Lindén et al.

Title:

DEVICE FOR REMOVING

PLANTS OR THE LIKE FROM

**GROUND** 

Appl. No.:

Unknown

Filing Date:

Herewith

Examiner:

Unknown

Art Unit:

Unknown

CERTIFICATION OF THE PROPERTY	orresponden rvice's "Ex 37 C.F.R. o: Commis	ce is being press Mai § 1.10 on ssioner for	deposited l Post O the date	ffice To indicated
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## UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Olavi Lindén Sjösängsvägen 81 Billnäs FIN-10330 Finland

Markus Paloheimo Malminkatu 24 D 50 Helsinki FIN-00100 Finland

[ ] Applicant claims small entity status under 37 CFR 1.27.

## Enclosed are:

- [X] Specification, Claim(s), and Abstract (12 pages).
- [X] Formal drawings (6 sheets, Figures 1, 2, 3, 4, 5, 6, and 7).
- Declaration and Power of Attorney (pages).
- [ ] Assignment of the invention to
- [ ] Assignment Recordation Cover Sheet.
- [ ] Small Entity statement.
- [ ] Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- [X] Information Disclosure Statement (3 pages).
- [X] Form PTO-1449 (1 page) with copies of 2 of the 5 listed reference(s).
- [X] Application Data Sheet (37 CFR 1.76) (4 pages).
- [X] Claim for Convention Priority (1 page).

## The filing fee is calculated below:

•	Claims		Included		Extra		Rate		Fee
	as Filed		in		Claims				Totals
		]	Basic Fee						
Basic Fee							\$770.00	=	\$770.00
Total	12	-	20	=	0	X	\$18.00	=	\$0.00
Claims:									
Independents	1	-	3	=	0 .	X	\$86.00	=	\$0.00
:									
If any Multiple	e Depender	nt Cla	im(s) pres	ent:		+	\$290.00	=	\$0.00
Surcharge und	er 37 CFR	1.16	(e) for late	filir	ng of	+	\$130.00	_	\$130.00
Executed Decl	laration and	d late	payment c	of fil	ing fee			_	
							SUBTOTAL:	=	\$900.00
[ ]		Sm	all Entity 1	Fees	Apply (	subtra	act ½ of above):	=	\$0.00

TOTAL FILING FEE: =	\$900.00
 TOTALLIBRIOLES.	\$200.00

- [ ] A check in the amount of \$0.00 to cover the filing fee is enclosed.
- [X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [ ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Data

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Respectfully submitted,

**-**у

Barry L. Grossman

Attorney for Applicant

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